
BURNS

Scene safety

ABC's

Suspect airway/respiratory involvement in chemical burns or fires in enclosed spaces

Stop the burning process

Search for associated injuries

Expeditious transport

FIELD ASSESSMENT/TREATMENT INDICATORS:

1. Airway control and pain management are patient management priorities
2. Assure your own safety, remove patient to a safe working environment
3. Assess ABC's to include cervical spinal immobilization, if indicated
4. Assess degree and extent of burn utilizing the rule of nines or rule of palms

DEFINITIVE CARE:

1. Assure and maintain ABC's
2. Stop the burning process: Remove contact with agent unless agent is adherent to the patient's skin (e.g. hot tar). Remove all clothing. Brush off chemical powders then flush copiously with cool water. Apply cool soaks to the wounds.
3. High flow oxygen as clinically indicated. Oxygen saturation on room air prior to oxygen administration, if available.
4. Apply moist dressing to the burned area. If more than 20% BSA burned, apply dry dressing.
5. Protect the burned area
 - a. Do not break blisters
 - b. Remove restrictive clothing/jewelry
 - c. Cover with sterile dressing or sterile burn sheets
 - d. Do not remove adherent materials
6. Monitor vital signs.
7. Expeditious transport.

NOTE: Assess all pediatric patients for hypothermia.

*****Palm of hand in the adult and pediatric patient is equal to 1% of Body Surface Area.**

CLASSIFY:

MINOR

15% 2nd degree	in Adults
10% 2nd degree	in Children
2% 3rd degree	in Anyone

MODERATE

15-25% 2nd degree	in Adults
10-20% 2nd degree	in Children
<10% 3rd degree	in Anyone

MAJOR

25% 2nd degree	in Adults
20% 2nd degree	in Children
>10% 3rd degree	in Anyone

Includes:

Electrical burns
Inhalation injuries
Burns with other associating traumas
High risk (old age, small children or poor health)